

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

FEB 2 3 2019

NEW HAMESHIRE F STATE

PLEASE PRINT		DEPARTMENT
I. Name of Lobbyist(s) Raymond B	urke	
II. Name of lobbyist's partnership, firm or	corporation, if any:	
	•	
New Hampshire Legal As (Name of partnership, firm or	corporation)	
117 North State Street	Concord, NH 03310	
Business Address: (Street)	(Town/City) (State) (Zip Code)
() <u>603-224-4107</u> (Telephone)) 603-224-2053 e-mail	rburke@nhla.org
III. This statement covers: (Choose one + treportable expense transactions which are All reportable transactions occurring in the	not attributable to any one client).	
(Full Name of Client a	s it appears on the Lobbyist Registration Form	
OR All reportable transactions by the lobbyis unrelated to any particular client.	(including the lobbyist's family), or the	obbying firm listed below which are
IV. Date of Report April 25, 2018 [] Reports cover: activity from date of registrat		6/30/18
October 31, 2018 [activity from 7/1/18 to 9.		
V. There have been no fees received as If this box is checked, complete just this form Concord, NH 03301.	nd no reportable transactions made and submit it to the Secretary of State's	since the last report. Office, State House, Room 204,
VI. Check if additional reports are attach	ed:	
If you have received fees or made expen		
 If you have paid an honorarium or reimbed Expense Reimbursement 	oursed expenses, you must file Addendun	n B- Report of Honorariums or
	de political contributions, you must file A	ddendum C- Political Contribution
Sworn Statement/Affirmation by Lobbyis I have read RSA 15, RSA 15-B, RSA 14-C a and complete to the best of my knowledge at (Signature of lobbyist)	and RSA 664 and hereby swear or affirm to and belief.	hat the foregoing information is true
Raymond Burke		,
(Print Name of lobbyist)		

LEASE PRIN

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Raymond Burke		
II. Name of lobbyist's part	nership, firm or corporation	, if any:	
	w Hampshire Legal Assistance	9	
(Name of partner	ership, firm or corporation)		
III. Name of Client	N/A	Dat	te
to lobbying, including fees for	Il fees received from the client in r services such as public advocac g legislation, and related legal	y, government relation	ns, or public relations services
a) Total of all fees received in	this reporting period	a) \$ _	0
	nis calendar year, prior to this rep al of all prior monthly reports for		0
c) Total of all fees received to (Add lines a and b)	o date	c) \$ _	0
d) Indicate the amount of any yet been paid	such fees that are due, but have	not d) \$.	0
fees. Separate reports are to the lobbyist(s)/firm that are at Expenses are to be reported in during the reporting period for individual expenses where the lunch where the cost was \$25 being lobbied, purchase of a cost of the cost was purpose not covered by a ceremonial object to be given restaurant expenses for a leg contributions will be reported	ships, firms, or corporations are be filed for expenditures made reinfelated to any one client a sein one of three categories of exper salaries, benefits, support staff expenditure was of \$25.00 or lead to the subject given to a persent individual expenditure made (a) (for example: purchase of a to the subject of lobbying with islative reception). Expenses for on separate addendums and should be filed for example:	elative to each client and parate report may be benses: (a) the aggregation of the expenses; (a) the aggregation of the expenses; (for example: meal that have a value of less than the expense of the ex	ad if expenditures are made by filed for the lobbyist(s)/firm gate total of all expenses paid (b) the aggregate total of all s purchased during a business \$10 that is given to the person a value of \$25.00 or less); and eriod of greater than \$25.00 for eater than \$25, purchase of \$25, but not greater than \$50 se reimbursement, or political ddendum A.
support staff, and office expen	or this reporting period for salarie ises, related directly or indirectly	to lobbying. a) \$ _	18.52
b) Total aggregate of expendi in a), of \$25 or less.	tures during this reporting period	, not reported b) \$ _	0
c) Total of all itemized expen	ditures reported in detail in section	on VI. c) \$ _	<i>U</i>

d) Total expenses for this reporting period	d) \$	18.50
(Add lines a, b and c)	·	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	1,966.
f) Total of all expenses year to date	f) \$	1,966.
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from I period, including by whom paid or to whom charged.	obbying fees	
Paid to:	Amount:	
	\$	
	\$	<u></u> -
	\$	
	\$	
	\$	
·	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	m that the fo	oregoing inform
	1	1.
12/1/2	2/18	7/19
(Signature of lobbyist)	<i>(</i> (1	pate)

.

.

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

	Raymond	Barke	
H. Name of lobbyist's partn	l ership, firm or co	rporation, if any:	
Now Hamoshi	a least	Azsistance	
New Hampshi	rship, firm or corporation)	1150101010	
III. Name of Client	•		Date
Political Contributions For each political contribution client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate:	eltes (Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$2			s Seeking State Senate
enter an estimated value and the	e word "estimate."		
Full name of candidate:			
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
			(Middle Name/Initial) Seeking
Amount of contribution \$ If the contribution is an in-kind	contribution, provide	Office Candidate is	•
Amount of contribution \$ If the contribution is an in-kind actual cost of the in-kind contri	contribution, provide	Office Candidate is	Seekingls or services provided, and enter the

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known,				
enter an estimated value and the word "estimate."				
	- 4:			
(If more than three contributions were made, report additional contribu	tions on separate addendum C forms.)			
Sworn Statement/Affirmation by Lobbyist				
I have read RSA 15, RSA 15-B and RSA 664 and hereby is true and complete to the best of my knowledge and beli				
29 spy	2/18/19			
(Signature of lobbyist) Raymond Burke	/(Da/te)			
(Print Name of lobbyist)				
•				

.

•

.